

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Mr. E. N.</i>	<i>545</i>	<i>6/13/00</i>
O.I.P.E. CLASSIFIER			<i>5/13/00</i>
FORMALITY REVIEW	<i>H.S.</i>	<i>545</i>	<i>7/3/00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
1	4/6/03
2	7/13/03
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Best Available Copy

If more than 150 claims or 10 actions
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